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| Fill in this information to identify your case: | | |
|-------------------------------------------------|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | |
|-----|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---|-----------------------------------------------|
| | - | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Derry First name L Middle name | | First name Middle name |
| | Bring your picture identification to your meeting with the trustee. | Shaw Last name and Suffix (Sr., Jr., II, III) | Ī | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-8575 | | |

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Case number (if known)

I have another reason.

Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Derry L Shaw

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|------------|---------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| ١. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. |
| | Include trade names and doing business as names | Business name(s) | Business name(s) |
| | | EINs | EINs |
| j. | Where you live | | If Debtor 2 lives at a different address: |
| | | 1526 McClure Road Aurora, IL 60505 | |
| | | Number, Street, City, State & ZIP Code Kane | Number, Street, City, State & ZIP Code |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
|) . | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |

I have another reason.

Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Derry L Shaw

| Par | Tell the Court About | Your B | ankruptcy Ca | ise | | | | |
|-----|------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------|----------------------------------------|-----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> f page 1 and check the appropriate | otice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy leck the appropriate box. | | |
| | choosing to file under | ■ Chapter 7 □ Chapter 11 | | | | | | |
| | | | | | | | | |
| | | | hapter 12 | | | | | |
| | | □с | hapter 13 | | | | | |
| | | | • | | | | | |
| 3. | How you will pay the fee | | about how yo | u may pay. Typ attorney is subi | pically, if you are paying the fee yo | k with the clerk's office in your local court for more burself, you may pay with cash, cashier's check, o alf, your attorney may pay with a credit card or ch | or money | |
| | | | | | tallments. If you choose this options (Official Form 103A). | on, sign and attach the Application for Individuals | s to Pay | |
| | | | but is not req applies to you | uired to, waive y ur family size ar | your fee, and may do so only if your fee, and may do so only if you you are unable to pay the fee i | n only if you are filing for Chapter 7. By law, a juc our income is less than 150% of the official povert n installments). If you choose this option, you mu cial Form 103B) and file it with your petition. | ty line that | |
| | | | | | | | | |
| 9. | Have you filed for bankruptcy within the | ■ No | | | | | | |
| | last 8 years? | ☐ Ye | | | NA (1 | | | |
| | | | District | | When | Case number | | |
| | | | District | | When When | Case number | | |
| | | | District | | vvnen | Case number | | |
| 10. | Are any bankruptcy | ■ No |) | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Ye | es. | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| 11. | Do you rent your | □ No | Go to l | ine 12. | | | | |
| | residence? | ■ Ye | Haarra | ur landlord obta | ained an eviction judgment agains | st you and do you want to stay in your residence? | • | |
| | | — 16 | ;s. | No. Go to line | 12. | | | |
| | | | _ | Yes. Fill out <i>In</i> bankruptcy per | | Judgment Against You (Form 101A) and file it wit | th this | |

| or 1 | Case 17-1 Derry L Shaw | .5390 | Doc 1 | Filed 05/17/17 Document | Entered 05/17/17 16:52:13 Page 4 of 48 Case number (if known) | Desc Main |
|---------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3: | Report About Any Bu | sinesses Y | ou Own a | s a Sole Proprietor | | |
| of ar | y full- or part-time | ■ No. | Go to Pa | art 4. | | |
| | | ☐ Yes. | Name a | nd location of business | | |
| busir an in sepa as a | ness you operate as dividual, and is not a rate legal entity such corporation, | | | , | | |
| sole | proprietorship, use a | | Number | , Street, City, State & ZIP | Code | |
| it to t | his petition. | | Check ti | he appropriate box to des | cribe your business: | |
| | | | | Health Care Business (as | defined in 11 U.S.C. § 101(27A)) | |
| | | | | Single Asset Real Estate | (as defined in 11 U.S.C. § 101(51B)) | |
| | | | | Stockbroker (as defined in | n 11 U.S.C. § 101(53A)) | |
| | | | | Commodity Broker (as de | fined in 11 U.S.C. § 101(6)) | |
| | | | 1 🗆 | None of the above | | |
| Cha _l Banl you | oter 11 of the kruptcy Code and are a small business | deadlines. | If you indicate, cash-flow | cate that you are a small in statement, and federal in | business debtor, you must attach your most re | ecent balance sheet, statement of |
| | | ■ No. | I am not | filing under Chapter 11. | | |
| busir | ness debtor, see 11 | □ No. | I am filin Code. | g under Chapter 11, but I | am NOT a small business debtor according to | to the definition in the Bankruptcy |
| | | ☐ Yes. | I am filin | g under Chapter 11 and I | am a small business debtor according to the | definition in the Bankruptcy Code. |
| 4: | Report if You Own or | Have Any | Hazardous | s Property or Any Prope | rty That Needs Immediate Attention | |
| Do y | ou own or have any | ■ No | | | | |
| prop | erty that poses or is | ■ NO. | | | | |
| | Are yof arrhbusin to to the Are you a debt and busin to the Sepanda as a partn of the Sepanda as | Report About Any Bushare you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). | Are you filing under Chapter 11 of the Bankruptcy Code and atte to this petition. Are you a filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). Report About Any Businesses Y and Report About Any Businesses Y and Susiness Y and Susiness Report Are you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you are deadlines, operations in 11 U.S.C. In the susiness debtor? No. | Report About Any Businesses You Own at Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). Report if You Own or Have Any Hazardous Do you own or have any property that poses or is | Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor of any full- or part-time business? No. Go to Part 4. Yes. Name and location of business A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Are you filling under Chapter 11 of the Bankruptcy Code and are you a small business debtor? Are you filling under Chapter 11 of the Bankruptcy Code and are you a small business debtor? Are you filling under Chapter 11, the court me deadlines. If you indicate that you are a small business debtor, see 11 U.S.C. § 101(51D). No. I am not filling under Chapter 11, but I Code. Yes. I am filling under Chapter 11 and I I am filling under Chapter 11 and II So you own or have any property that poses or is | Document Page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 No. The page 4 of 48 Case number (# known) The page 4 of 48 Case number (# known) The page 4 of 48 No. The page 4 of 48 Case number (# known) The page 4 of 48 No. The page 4 of 48 No. The page 4 of 48 No. The page 4 of 48 Case number (# known) The page 4 of 48 No. The page 4 of 48 |

of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Derry L Shaw

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Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|------------------------------------------------------|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | tor 1 Derry L Shaw | | Document | Page 6 of 48 | ase number (if kn | own) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------|--------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Pari | | ions for Rei | norting Purposes | | | |
| | What kind of debts do you have? | 16a. | <u> </u> | | | n 11 U.S.C. § 101(8) as "incurred by an |
| | | 1 | ☐ No. Go to line 16b. | | | |
| | | | Yes. Go to line 17. | | | |
| | | | Are your debts primarily business money for a business or investment | | | |
| | | I | ☐ No. Go to line 16c. | | | |
| | | | ☐ Yes. Go to line 17. | | | |
| | | 16c. 5 | State the type of debts you owe that | are not consumer debts | s or business deb | ots |
| 17. | Are you filing under Chapter 7? | □ No. | l am not filing under Chapter 7. Go t | o line 18. | | |
| Do you estimate that after any exempt property is excluded and Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is are paid that funds will be available to distribute to unsecured creditors? | s excluded and administrative expenses | | | | | |
| | administrative expenses are paid that funds will | I | No | | | s are defined in 11 U.S.C. § 101(8) as "incurred by an ite." are debts that you incurred to obtain of the business or investment. by business debts 25,001-50,000 |
| | be available for distribution to unsecured creditors? | 1 | □ Yes | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | | ☐ 25,001-50,000 |
| | you estimate that you owe? | □ 50-99 | | ☐ 5001-10,000 | | |
| | | ☐ 100-199 ☐ 200-999 | 9 | □ 10,001-25,000 | | More than 100,000 |
| 19. | How much do you | □ \$0 - \$50 | 0,000 | □ \$1,000,001 - \$10 mill | ion | □ \$500,000,001 - \$1 billion |
| | be worth? | \$50,001 - \$100,000 | | ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million | | |
| | | | · ••••• | □ \$100,000,001 - \$100 h | | |
| 20. | How much do you | □ \$0 - \$50 | | □ \$1,000,001 - \$10 mill | | |
| | to be? | | . 4.00,000 | □ \$10,000,001 - \$50 m □ \$50,000,001 - \$100 n | | _ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' |
| | | ate your assets to □ \$50,001 - \$100,0 □ \$100,001 - \$500 □ \$500,001 - \$1 m much do you ate your liabilities ? □ \$0 - \$50,000 □ \$50,001 - \$100,001 - \$500,001 - \$100,001 - \$500,001 - \$1 m Sign Below □ have examined thi | σι φοσο,σσο | □ \$100,000,001 - \$500 | | |
| Part | 7: Sign Below | | | | | |
| For | you | I have exa | mined this petition, and I declare un | der penalty of perjury tha | at the information | provided is true and correct. |
| | | | | | | |
| | | | ey represents me and I did not pay I have obtained and read the notice | | | attorney to help me fill out this |
| | | I request re | elief in accordance with the chapter | of title 11, United States | Code, specified | in this petition. |
| | | bankruptcy and 3571. | / case can result in fines up to \$250 | | | |
| | | /s/ Derry Derry L S Signature | Shaw | Signatu | re of Debtor 2 | |
| | | Executed of | ,, | Execute | ed on | |
| | | | MM / DD / YYYY | | MM / DD | / YYYY |

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Debtor 1 Derry L Shaw

Debtor 1 Derry L Shaw

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ James L. Hardemon | Date | May 11, 2017 |
|----------------------------------------|---------------|----------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| | | |
| James L. Hardemon | | |
| Printed name | | |
| Legal Remedies, Chartered | | |
| Firm name | | |
| 8525 S. Stony Island | | |
| Chicago, IL 60617 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 773-374-5288 | Email address | |
| 1126229 | | |
| Bar number & State | | |

| | | Docume | ent Page 8 of 48 | 8 | |
|---------------------|--------------------------|-------------------|------------------|---|------------------------------------|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Derry L Shaw | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number _ | | | | | Charle if this is an |
| (ii kilowii) | | | | | Check if this is an amended filing |
| | | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Pa | t 1: Summarize Your Assets | | |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------------|
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 118,920.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 118,920.00 |
| Pa | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 14,265.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 44,380.00 |
| | Your total liabilities | \$ | 58,645.00 |
| Pa | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,340.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,336.00 |
| Pa | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sch | nedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a | a personal, | family, or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Debtor 1 Derry L Shaw

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Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,694.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total c | laim |
|------------------------------------------------------------------------------------------------------------------------------|---------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | 17 10000 1 | Document | Page 10 of 48 | 17 10.02.10 | oo wan |
|-----------------------------|-----------------------------------------|------------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------|---------------------------------------|
| Fill in this infor | mation to identify your | case and this filing: | | | |
| Debtor 1 | Derry L Shaw First Name | Middle Name | Last Name | | |
| Debtor 2 | riistivamo | Widale Hallie | Last Name | | |
| Spouse, if filing) | First Name | Middle Name | Last Name | | |
| Inited States Ba | ankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | | |
| Case number | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | | | | | |
| Official Fo | orm 106A/B | | | | |
| Schedu | le A/B: Prop | ertv | | | 12/15 |
| each category, | separately list and describe | e items. List an asset only once. | | | |
| | | te as possible. If two married pe a separate sheet to this form. Or | | | |
| nswer every que | | | , , , , , , , , , , , , , , , , , , , , | .,, | , |
| Part 1: Describe | Each Residence, Building | , Land, or Other Real Estate You | Own or Have an Interest In | | |
| Do you own or | have any legal or equitable | interest in any residence, build | ing, land, or similar property? | | |
| . | , , , , , , , , , , , , , , , , , , , , | • | | | |
| No. Go to Pa | ··· - · | | | | |
| ☐ Yes. Where | is the property? | | | | |
| Part 2: Describe | Your Vehicles | | | | |
| □ No ■ Yes | | | | | |
| 3.1 Make: | 2010 | Who has an interest ir | n the property? Check one | Do not deduct secured cla the amount of any secure | ed claims on Schedule D: |
| Model: | 4 Runner | Debtor 1 only | | Creditors Who Have Clair | ms Secured by Property. |
| Year: Approxima | 2010 ate mileage: 103 | Debtor 2 only Debtor 1 and Debtor □ Debtor 1 | r 2 only | Current value of the entire property? | Current value of the portion you own? |
| Other infor | | At least one of the d | | , | |
| | | Check if this is cor | nmunity property | \$11,325.00 | \$11,325.00 |
| 3.2 Make: | 2012 | Who has an interest in | n the property? Check one | Do not deduct secured cla | aims or exemptions. Put |
| Model: | Matrix | Debtor 1 only | Title property? Check one | the amount of any secure Creditors Who Have Clair | |
| Year: | Toyota | Debtor 2 only | | Current value of the | Current value of the |
| Approxima | | Debtor 1 and Debtor | r 2 only | entire property? | portion you own? |
| Other infor | mation: | At least one of the d | ebtors and another | | |
| | | Check if this is cor (see instructions) | nmunity property | \$6,175.00 | \$6,175.00 |
| | | <u> </u> | | | |
| | | TVs and other recreational vo | | | |
| ∟ланірі с 5. ¤08 | ato, traners, motors, perso | onai waterorait, iistiilig vessels, | , эпомпновнев, пюютсусте а | DOG SOLIGS | |
| ■ No | | | | | |
| ☐ Yes | | | | | |

Official Form 106A/B Schedule A/B: Property page 1

| Debtor 1 | | ed 05/17/17 ocument | Entered 05/17/17 16 Page 11 of 48 Case numb | 6:52:13 per (if known) _ | Desc Main |
|--------------------------------------|------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------------------------|-------------------------------|-----------------------------------------------------------------------------------|
| | e dollar value of the portion you own for all o you have attached for Part 2. Write that num | | | | \$17,500.00 |
| Part 3: De | scribe Your Personal and Household Items | | | | |
| | n or have any legal or equitable interest in a | any of the followi | ing items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | old goods and furnishings es: Major appliances, furniture, linens, china, ki | tchenware | | | |
| Yes. | Describe | | | | |
| | Household Furnishings | 3 | | | \$800.00 |
| ■ No | tics es: Televisions and radios; audio, video, stereo including cell phones, cameras, media play Describe | | ment; computers, printers, scann | ers; music coll | lections; electronic devices |
| Example No | bles of value es: Antiques and figurines; paintings, prints, or other collections, memorabilia, collectibles Describe | other artwork; boo | ks, pictures, or other art objects; | stamp, coin, o | r baseball card collections; |
| Exampl No | ent for sports and hobbies es: Sports, photographic, exercise, and other h musical instruments Describe | obby equipment; b | picycles, pool tables, golf clubs, s | kis; canoes an | d kayaks; carpentry tools; |
| ■ No | ns les: Pistols, rifles, shotguns, ammunition, and l Describe | related equipment | | | |
| □ No [′] | s bles: Everyday clothes, furs, leather coats, designer | gner wear, shoes, | accessories | | |
| | Used Clothing | | | | \$200.00 |
| ■ No □ Yes. 13. Non-fa Examp | y bles: Everyday jewelry, costume jewelry, engag Describe rm animals bles: Dogs, cats, birds, horses Describe | ement rings, wedd | ling rings, heirloom jewelry, watc | hes, gems, gol | d, silver |

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

 $\hfill \square$ Yes. Give specific information.....

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Case number (if known) Debtor 1 **Derry L Shaw** 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,000.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... First Midwest Bank \$400.00 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

| | Case 17-15390 | DOC 1 | Filed 02/11/11 | Dags 12 of 49 | Desc Main |
|------------------------|-------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------|------------------------------------------------------|-----------------------------------------------------------------------------------|
| Debtor 1 | Derry L Shaw | | Document | Page 13 of 48 Case number (if known |) |
| ☐ Yes. | Institution na | ame and descr | iption. Separately file th | ne records of any interests.11 U.S.C. § 521(| p): |
| ■ No | | | ty (other than anythin | g listed in line 1), and rights or powers e | xercisable for your benefit |
| | . Give specific information a | | | | |
| | ts, copyrights, trademarks ples: Internet domain names | | | | |
| ☐ Yes. | . Give specific information a | bout them | | | |
| | ses, franchises, and other apples: Building permits, exclu | | | n holdings, liquor licenses, professional licer | nses |
| ☐ Yes. | . Give specific information a | bout them | | | |
| Money or | property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. Tax re | funds owed to you | | | | |
| ■ No □ Yes. | . Give specific information ab | oout them, incl | luding whether you alre | ady filed the returns and the tax years | |
| 29. Family Exam | | alimony, spou | sal support, child suppo | ort, maintenance, divorce settlement, proper | ty settlement |
| ☐ Yes. | . Give specific information | | | | |
| Exam | benefits; unpaid loans | ty insurance p | | efits, sick pay, vacation pay, workers' comp | ensation, Social Security |
| ⊔ Yes. | . Give specific information | | | | |
| | sts in insurance policies oples: Health, disability, or life | e insurance; he | ealth savings account (| HSA); credit, homeowner's, or renter's insur | ance |
| ■ Yes. | . Name the insurance compa Com | any of each po pany name: | licy and list its value. | Beneficiary: | Surrender or refund value: |
| | Line | oln Benefit | | Children | \$100,000.00 |
| If you some | nterest in property that is d are the beneficiary of a livin one has died. Give specific information | | | d surance policy, or are currently entitled to re | ceive property because |
| | s against third parties, who | | | t or made a demand for payment to sue | |
| ■ No □ Yes. | . Describe each claim | | | | |
| | | ed claims of a | every nature including | g counterclaims of the debtor and rights | to set off claims |
| ■ No | | ca ciaiiiis Uf (| every nature, menudin | g counterclaims of the deptor and rights | to set on Gianns |
| П Уес | Describe each claim | | | | |

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Case number (if known) Document Debtor 1 **Derry L Shaw** 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$100,420.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6 If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$17,500.00 57. Part 3: Total personal and household items, line 15 \$1,000.00 Part 4: Total financial assets, line 36 \$100,420.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$118,920.00 \$118,920.00

Official Form 106A/B Schedule A/B: Property page 5

Total of all property on Schedule A/B. Add line 55 + line 62

\$118,920.00

| | | | 111 FAUE 13 01 40 | |
|---------------------|--------------------------|-------------------|-------------------|--|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Derry L Shaw | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|-----------------------------------------|-------------------|-----------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| \$11,325.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$800.00 | | \$800.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$20.00 | | \$20.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$400.00 | | \$400.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$100,000.00 | | \$100,000.00 | 215 ILCS 5/238 |
| | | 100% of fair market value, up to any applicable statutory limit | |
| | \$800.00 \$400.00 | \$100,000.00 | Check only one box for each exemption. \$11,325.00 \$100% of fair market value, up to any applicable statutory limit \$20.00 \$20.00 \$20.00 \$20.00 \$400.00 \$400.00 \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$20.00 \$20.00 \$20.00 \$20.00 \$20.00 \$20.00 \$300.00 \$400.00 \$400.00 \$400.00 \$100% of fair market value, up to any applicable statutory limit |

Filed 05/17/17 Entered 05/17/17 16:52:13 Document Page 16 of 48 Case number (if known) Derry L Shaw Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B \$4,000 WildCardExempt-applied to 735 ILCS 5/12-1001(b) \$2,780.00 \$2,780.00 any personal property listd and any 100% of fair market value, up to unexempt amount of Toyota 4Runner Line from Schedule A/B: any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Case 17-15390

Yes

Doc 1

Desc Main

| | | Document P | Page 17 (| of 48 | | |
|-------------------------------------------------------|-------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------------------------------------------------|--------------------------------------------------------|-----------------------------------|
| Fill in this information | on to identify you | r case: | | | | |
| | Derry L Shaw | Middle News | | | | |
| | irst Name | Middle Name La | ast Name | | | |
| Debtor 2 (Spouse if, filing) | irst Name | Middle Name La | ast Name | | | |
| United States Bankrup | ptcy Court for the: | NORTHERN DISTRICT OF ILLING | OIS | | | |
| Case number | | | | | _ | if this is an ed filing |
| Official Form 10 | 06D | | | | | |
| | | Who Have Claims Se | ecured | by Property | v | 12/15 |
| Be as complete and acc | urate as possible. I | f two married people are filing together, l out, number the entries, and attach it to th | both are equa | ally responsible for su | pplying correct informa | |
| 1. Do any creditors have | claims secured by | your property? | | | | |
| ☐ No. Check this | box and submit th | nis form to the court with your other sch | nedules. You | have nothing else to | report on this form. | |
| Yes. Fill in all of | of the information b | pelow. | | | | |
| Part 1: List All Se | cured Claims | | | | | |
| 2. List all secured claim for each claim. If more the | ns. If a creditor has n han one creditor has | nore than one secured claim, list the credito a particular claim, list the other creditors in cal order according to the creditor's name. | | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 Toyota Motor | Credit | Describe the property that secures the | claim: | \$7,595.00 | \$6,175.00 | \$1,420.00 |
| Creditor's Name | | Toyota 2012 Matrix 100000 mile As of the date you file, the claim is: Cher | | | | |
| PO Box 8026 Cedar Rapids | s, IA 52409 | apply. Contingent | ok all tilat | | | |
| Number, Street, City, | State & Zip Code | ☐ Unliquidated ☐ Disputed | | | | |
| Who owes the debt? | Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | An agreement you made (such as mort car loan) | tgage or secur | red | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor | 2 only | ☐ Statutory lien (such as tax lien, mechan | niola lian) | | | |
| At least one of the de | • | ☐ Judgment lien from a lawsuit | iics iieii) | | | |
| ☐ Check if this claim r | | ☐ Other (including a right to offset) | | | | |
| community debt | | | | | | |
| Date debt was incurred | ! | Last 4 digits of account number | 0001 | | | |
| 2.2 Toyota Motor | Credit | Describe the property that secures the | claim: | \$6,670.00 | \$11,325.00 | \$0.00 |
| Creditor's Name | | 2010 2010 4 Runner 103000 mil | les | . , | | |
| | | | | | | |
| PO Box 8026 | | As of the date you file, the claim is: Checapply. | ck all that | | | |
| Cedar Rapids | | ☐ Contingent | | | | |
| Number, Street, City, | State & Zip Code | Unliquidated | | | | |
| Who owes the debt? | Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ☐ An agreement you made (such as mort | tgage or secur | red | | |
| Debtor 2 only | | car loan) | | | | |
| lacksquare Debtor 1 and Debtor | 2 only | ☐ Statutory lien (such as tax lien, mechan | nic's lien) | | | |
| At least one of the de | ebtors and another | ☐ Judgment lien from a lawsuit | | | | |
| Check if this claim r community debt | relates to a | Other (including a right to offset) | | | | |
| Date debt was incurred | Ī | Last A digits of account number | 0004 | | | |

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| Debtor 1 | Derry L Shaw | | | Case number (if know) | |
|----------|--------------|-------------|-----------|-----------------------|--|
| | First Name | Middle Name | Last Name | | |

| Add the dollar value of your entries in Column A on this page. Write that number here: | \$14,265.00 |
|------------------------------------------------------------------------------------------------------------|-------------|
| If this is the last page of your form, add the dollar value totals from all pages. Write that number here: | \$14,265.00 |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

| | | | Document | Page 1 | 9 of 48 | _ | |
|--------------------------------|-----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------|-------------------------------------------------------------------------------|
| =111 | in this inforn | nation to identify your | case: | | | | |
| De | btor 1 | Derry L Shaw | | | | | |
| | | First Name | Middle Name | Last Name | | | |
| | btor 2 | | | | | | |
| (Spo | ouse if, filing) | First Name | Middle Name | Last Name | | | |
| Un | ited States Ba | nkruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | | | |
| <u></u> | | | | | | | |
| | se number _ nown) | | | | | П | Check if this is an |
| | | | | | | _ | amended filing |
| | | _ | | | | - | - |
| | ficial Forn | | | | | | _ |
| <u>3c</u> | hedule E | /F: Creditors W | ho Have Unsecured | Claims | | | 12/15 |
| ny ich ich eft. am | executory cont edule G: Execu edule D: Credit Attach the Con e and case nur | racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sec tinuation Page to this pag nber (if known). | se Part 1 for creditors with PRIORIT that could result in a claim. Also bired Leases (Official Form 106G). I cured by Property. If more space is ge. If you have no information to re | list executory of Do not include needed, copy | contracts on Schedule A/B: I any creditors with partially the the Part you need, fill it out, | Property (Offic secured claims number the er | ial Form 106A/B) and on s that are listed in ntries in the boxes on the |
| | | II of Your PRIORITY Ur | | | | | _ |
| 1. | - | ors have priority unsecure | d claims against you? | | | | |
| | No. Go to P | art 2. | | | | | |
| | ☐ Yes. | | | | | | |
| Pa | rt 2: List A | II of Your NONPRIORIT | Y Unsecured Claims | | | | |
| 3. | Do any credito | ors have nonpriority unse | cured claims against you? | | | | |
| | ☐ No. You have | ve nothing to report in this p | eart. Submit this form to the court with | your other sche | edules. | | |
| | Yes. | | | | | | |
| 4. | List all of your | r nannriarity unacqurad a | aims in the alphabetical order of the | a araditar who | holds each claim. If a gradi | tar baa mara th | an ana nannyiarity |
| - . | unsecured clair | m, list the creditor separatel | y for each claim. For each claim listed ist the other creditors in Part 3.If you | d, identify what t | type of claim it is. Do not list cl | laims already in | cluded in Part 1. If more |
| | | | | | | | Total claim |
| 4.1 | Bank O | f America | Last 4 digits of acc | count number | 0986 | | \$7,262.00 |
| _ | | y Creditor's Name | | | | | <u> </u> |
| | Nc4-105 | | | | Opened 1/26/04 Las | st Active | |
| | Po Box Greens | 26012 boro, NC 27410 | When was the deb | t incurred? | 10/16 | | _ |
| | | treet City State Zlp Code | As of the date you | file, the claim i | is: Check all that apply | | |
| | Who incu | rred the debt? Check one. | | | | | |
| | ■ Debtor | 1 only | ☐ Contingent | | | | |
| | ☐ Debtor | 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor | 1 and Debtor 2 only | ☐ Disputed | | | | |
| | | t one of the debtors and an | other Type of NONPRIOR | RITY unsecured | d claim: | | |
| | | if this claim is for a com | _ | | | | |
| | debt | | ☐ Obligations arisi | | aration agreement or divorce th | hat you did not | |
| | _ | m subject to offset? | report as priority cla | | | | |
| | No | | • | - | ng plans, and other similar deb | ots | |
| | ☐ Yes | | Other. Specify | Credit Card | <u>i</u> | | _ |
| | | | | | | | |

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| Derry L Snaw | | Case number (if know) | |
|---------------------------------------------------------|--------------------------------------------------------------|-----------------------------------------------|----------|
| Bank Of America Nonpriority Creditor's Name | Last 4 digits of account number | 8134 | \$865.00 |
| Nc4-105-03-14 | | Opened 01/08 Last Active | |
| Po Box 26012 | When was the debt incurred? | 11/16 | |
| Greensboro, NC 27410 Number Street City State Zlp Code | | in Charle all that apply | |
| Who incurred the debt? Check one. | As of the date you file, the claim | is: Спеск ан так арріу | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| Comenity Bank/nwyrk&co | Last 4 digits of account number | 9072 | \$634.00 |
| Nonpriority Creditor's Name | _ | 0 | |
| 220 W Schrock Rd Westerville, OH 43081 | When was the debt incurred? | Opened 12/03 Last Active 02/17 | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Charge Acc | count | |
| Diversified Consultants | Last 4 digits of account number | 1565 | \$185.00 |
| Nonpriority Creditor's Name | | | |
| Jacksonville, FL 32255 | When was the debt incurred? | 2016 | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | · | , | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| □Yes | ■ Other. Specify Comcast/C | able | |
| | | | |

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Debtor 1 Derry L Shaw Case number (if know) 4.5 \$3,002.00 LVNV Funding Last 4 digits of account number 3983 Nonpriority Creditor's Name Opened 01/17 Last Active Po Box 10497 When was the debt incurred? 05/15 Greenville, SC 29603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Capital One** ☐ Yes Other. Specify N.A. 4.6 Midland Funding Last 4 digits of account number 3591 \$9,251.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 04/16 Last Active Po Box 939069 When was the debt incurred? 09/15 San Diego, CA 92193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Synchrony** ■ Other. Specify Bank ☐ Yes 4.7 **Professional Clinical Labs** Last 4 digits of account number 7426 \$27.00 Nonpriority Creditor's Name 26051 Network Place When was the debt incurred? 2013 Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes

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| | Case number (if know) | |
|-----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Last 4 digits of account number | 6780 | \$3,500.00 |
| When was the debt incurred? | 2016 | |
| As of the date you file, the claim | is: Check all that apply | |
| , | | |
| ☐ Contingent | | |
| ☐ Unliquidated | | |
| ☐ Disputed | | |
| Type of NONPRIORITY unsecure | d claim: | |
| ☐ Student loans | | |
| ☐ Obligations arising out of a separe report as priority claims | aration agreement or divorce that you did not | |
| ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Other. Specify Credit Card | <u> </u> | |
| Last 4 digits of account number | 8575 | \$600.00 |
| - | 0040 0047 | |
| When was the debt incurred? | 2012-2017 | |
| As of the date you file, the claim | is: Check all that apply | |
| • | , | |
| ☐ Contingent | | |
| ☐ Unliquidated | | |
| ☐ Disputed | | |
| Type of NONPRIORITY unsecure | d claim: | |
| ☐ Student loans | | |
| | aration agreement or divorce that you did not | |
| | | |
| · | • | |
| Other. Specify Medical Bil | <u>ls</u> | |
| Last 4 digits of account number | 9333 | \$5,568.00 |
| - and a signe of account number | | +-, |
| | Opened 05/14 Last Active | |
| When was the debt incurred? | 06/16 | |
| As of the date you file, the claim | is: Check all that apply | |
| or and you mo, mo olum | St. Sol. an inat appry | |
| ☐ Contingent | | |
| - | | |
| | | |
| • | d claim: | |
| ☐ Student loans | | |
| | aration agreement or divorce that you did not | |
| report as priority claims | | |
| Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Other Specify Credit Card | 1 | |
| | When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Cother. Specify Credit Carc Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Medical Bil Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin | When was the debt incurred? 2016 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Credit Card Last 4 digits of account number 8575 When was the debt incurred? 2012-2017 As of the date you file, the claim is: Check all that apply Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bills Last 4 digits of account number 9333 Opened 05/14 Last Active O6/16 As of the date you file, the claim is: Check all that apply Opened 05/14 Last Active O6/16 As of the date you file, the claim is: Check all that apply Opened 05/14 Last Active O6/16 As of the date you file, the claim is: Check all that apply Opened 05/14 Disputed Opened 05/14 Opened 05/14 Opened 05/16 As of the date you file, the claim is: Check all that apply Opened 05/16 Opened 05/16 |

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| Debto | or 1 Derry L Shaw | | Case number (if know) | |
|----------|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|----------------------------------------------|------------|
| 4.1 1 | Tnb-Visa (TV) / Target | Last 4 digits of account number | 3451 | \$3,671.00 |
| | Nonpriority Creditor's Name C/O Financial & Retail Services Mailstop BV PO Box 9475 Minneapolis, MN 55440 | When was the debt incurred? | Opened 01/07 Last Active 04/15 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | ☐ Debts to pension or profit-sharin | | |
| | ☐ Yes | Other. Specify Credit Card | <u> </u> | |
| 4.1 | US Bank/Rms CC | Last 4 digits of account number | 1562 | \$3,078.00 |
| | Nonpriority Creditor's Name Card Member Services Po Box 108 | When was the debt incurred? | Opened 10/05 Last Active 05/15 | |
| | St Louis, MO 63166 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | , | or o | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.1 | US Bank/Rms CC | Last 4 digits of account number | 4691 | \$6,737.00 |
| | Nonpriority Creditor's Name Card Member Services Po Box 108 | When was the debt incurred? | Opened 01/13 Last Active 06/15 | |
| | St Louis, MO 63166 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | \square Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | , | |
| | ■ No | ☐ Debts to pension or profit-sharin | | |
| | ☐ Yes | Other. Specify Credit Card | <u> </u> | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Derry L Shaw

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Foster & Garbus LLP **60 Motor Parkway** Commack, NY 11725-5710

On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---------------------------------------------------------------------------------------------------------|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 44,380.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 44,380.00 |

| | | | III FAUE 75 UL40 | |
|---------------------|---------------------------|-------------------|------------------|--|
| Fill in this info | rmation to identify your | case: | | |
| Debtor 1 | Derry L Shaw | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States E | Sankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | n whom you have the or, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|----------------------------------------------------------|-------------------|-----------------------------------------|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| | • | | | | |

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| | | DUGUILE | <u> Paue zo c</u> | JI 40 | |
|------------------------------|-----------------------------------------------------------------|---------------------------------------------------|---------------------------|-------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Derry L Shaw | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, fili | ng) First Name | Middle Name | Last Name | | |
| | | NORTHERN DISTRICT | OFILLINOIS | | |
| United Sta | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case num | ber | | | | Charle if their in an |
| (II KHOWII) | | | | | Check if this is an amended filing |
| | | | | | g |
| Officia | l Form 106H | | | | |
| Sched | lule H: Your Cod | ebtors | | | 12/15 |
| people are ill it out, a | filing together, both are equ | ally responsible for supposes on the left. Attach | olying correct informat | ion. If more space is ne | te as possible. If two married eded, copy the Additional Page, of any Additional Pages, write |
| | ` , | , , | | | |
| 1. Do | you have any codebtors? (If | you are filing a joint case, | do not list either spouse | as a codebtor. | |
| ■ No | | | | | |
| ☐ Yes | 3 | | | | |
| 2. Wit | hin the last 8 years, have you | ı lived in a community pr | operty state or territor | y? (Community property | states and territories include |
| | a, California, Idaho, Louisiana | | | | |
| ■ No | Go to line 3. | | | | |
| | s. Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| | | | | | |
| in line Form | e 2 again as a codebtor only i 106D), Schedule E/F (Official | f that person is a guaran | tor or cosigner. Make | sure you have listed the | with you. List the person shown e creditor on Schedule D (Official schedule E/F, or Schedule G to fill |
| out C | olumn 2. | | | | |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | P Code | | Column 2: The cred Check all schedules | ditor to whom you owe the debt |
| | , , , , , , | | | Officer all seriedules | з шасарру. |
| 3.1 | Name | | | Schedule D, line | |
| | Name | | | ☐ Schedule E/F, lir☐ Schedule G, line | |
| _ | Newsbar | | | | |
| | Number Street City | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, lir | |
| | | | | ☐ Schedule G, line | |
| - | Number Street | | | _ | |
| | City | State | ZIP Code | | |

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| Fill | in this information to identify your ca | 356. | | | | | | |
|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|------------------------------------------------------|------------------|------------------|-------------------------------|-----------------------------------------------------|---------------------------|
| | otor 1 Derry L Sha | | | | | | | |
| _ | otor 2 ouse, if filing) | | | | _ | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | _ | | | |
| (If kr | fficial Form 106l | | | | | 13 income | ed filing ent showing post as of the followin | |
| | chedule I: Your Inc | omo | | | | MM / DD/ Y | YYY | 12/15 |
| sup spo atta Par | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. **T1: Describe Employment | are married and not filing wi | ng jointly, and your spo th you, do not include i | use is inform | living wation ab | ith you, incl out your spo | ude information ouse. If more sp | about your ace is needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or non-filing s | pouse |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | | | ☐ Emple | • | |
| | information about additional employers. | | ☐ Not employed | | | ☐ Not e | mployed | |
| | Include part-time, seasonal, or | Occupation | Asst. Librarian | | | | | |
| | self-employed work. | Employer's name | East Aurora Distric | ct 31 | | _ | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 417 5th Street Aurora, IL 60505 | | | | | |
| | | How long employed the | here? 2 years | | | | | |
| Par | Give Details About Mor | nthly Income | | | | | | |
| | mate monthly income as of the dause unless you are separated. | ate you file this form. If y | you have nothing to repor | rt for a | ıny line, w | rite \$0 in the | space. Include y | our non-filing |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information for | r all er | mployers | for that perso | on on the lines be | low. If you need |
| | | | | | For I | Debtor 1 | For Debtor 2 non-filing sp | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 1,704.00 | \$ | N/A |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ | N/A |

Calculate gross Income. Add line 2 + line 3.

1,704.00

N/A

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| Deb | tor 1 | Derry L Shaw | | _ | | Case | number (if ki | nown) | | | | |
|-----|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|------------|-----|-----------|---------------|---------------------------------|-----------|------------------------|----------------------|---------------------|
| | | | | | | For | Debtor 1 | | | r Debtor n-filing s | | |
| | Copy | y line 4 here | | 4. | | \$ | 1,704 | 4.00 | \$ | | N/A | |
| E | Liet | | | | | | | | | | | _ |
| 5. | | all payroll deductions: | iter do de otiono | E. | _ | ¢. | 000 | | æ | | N1/ | |
| | 5a. 5b. | Tax, Medicare, and Social Secur Mandatory contributions for reti | • | 5a 5b | | \$_ \$ | | 3.00 0.00 | \$_ \$ | | N// N// | |
| | 5c. | Voluntary contributions for retire | • | 50 | | \$_ | | 0.00 | \$_ | | N/A | |
| | 5d. | Required repayments of retirement | - | 50 | | \$- | | 0.00 | \$- | | N/A | |
| | 5e. | Insurance | | 56 | | \$ | | 3.00 | \$ | | N// | |
| | 5f. | Domestic support obligations | | 5f | f. | \$ | (| 0.00 | \$ | | N/A | A |
| | 5g. | Union dues | | 50 | g. | \$ | 38 | 3.00 | \$_ | | N/A | A |
| | 5h. | Other deductions. Specify: | | 5h | h.+ | \$ | (| 0.00 | + \$_ | | N/A | <u>A</u> |
| 6. | Add | the payroll deductions. Add lines | 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$_ | 354 | 4.00 | \$_ | | N/A | <u>A</u> |
| 7. | Calc | ulate total monthly take-home pay | Subtract line 6 from line 4. | 7. | | \$_ | 1,350 | 0.00 | \$_ | | N/A | <u>A</u> |
| 8. | List 8a. | all other income regularly received Net income from rental property profession, or farm Attach a statement for each proper receipts, ordinary and necessary b | and from operating a business, ty and business showing gross | | | | | | | | | |
| | | monthly net income. | | 88 | | \$_ | | 0.00 | \$_ | | N/A | |
| | 8b. | Interest and dividends | | 8k | b. | \$_ | (| 0.00 | \$_ | | N/A | <u>A</u> |
| | 8c. | regularly receive Include alimony, spousal support, settlement, and property settlement | ou, a non-filing spouse, or a dependent child support, maintenance, divorce it. | 80 | | \$_ | | 0.00 | \$_ | | N// | |
| | 8d. | Unemployment compensation | | 80 | | \$_ | | 0.00 | \$_ | | N/A | |
| | 8e. | Social Security | at a construction and a decision and a decision | 86 | e. | \$ | (| 0.00 | \$_ | | N/A | <u>A</u> |
| | 8f. | | alue (if known) of any non-cash assistand nps (benefits under the Supplemental | ce 8f | f. | \$ | (| 0.00 | \$ | | N/A | Α. |
| | 8g. | Pension or retirement income | | 8 <u>g</u> | g. | \$ | 1,525 | | \$ | | N/A | |
| | | | Son's Contribution for car | | | _ | • | | _ | | | _ |
| | 8h. | Other monthly income. Specify: | payment | 8ł | h.+ | \$_ | 465 | 5.00 | + \$_ | | N/A | <u> </u> |
| 9. | Add | all other income. Add lines 8a+8b | +8c+8d+8e+8f+8g+8h. | 9. | . [| \$ | 1,990 | 0.00 | \$_ | | N. | /A |
| 10 | Calc | ulate monthly income. Add line 7 | L line 0 | 10. | \$ | | 3,340.00 | 1 6 | | N/A | | 3,340.00 |
| 10. | | the entries in line 10 for Debtor 1 and | | 10. | Ψ - | | 3,340.00 | ا [∓] ا ^۳ - | | IVA | - Ψ - | 3,340.00 |
| 11. | State Inclu | e all other regular contributions to de contributions from an unmarried printed or relatives. ot include any amounts already inclu | the expenses that you list in Schedul partner, members of your household, you added in lines 2-10 or amounts that are no | ır dep | | • | | | • | Schedul | e <i>J.</i> +\$ _ | 0.00 |
| 12. | | e that amount on the Summary of Sc | ine 10 to the amount in line 11. The re hedules and Statistical Summary of Certa | | | | | | | e. 12. | \$ | 3,340.00 |
| | | | | | | | | | | | Comb | oined hly income |
| 13. | Do y ■ | ou expect an increase or decrease No. | e within the year after you file this form | n? | | | | | | | | |
| | _ | Yes Explain: | | | | | | | | | | |

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| Filli | in this information to identif | y your case: | | | 1 | | |
|-------|-----------------------------------------------------------------------------------|-------------------------------|----------------------------------------------|----------------------------------------|-----------------|-------------------|-----------------------------------------------|
| Debt | | | | | Chec | k if this is: | |
| | <u>Derry L 3</u> | IIaw | | | | An amended filing | |
| Debt | tor 2 buse, if filing) | | | | | | ving postpetition chapter the following date: |
| (Зро | ouse, ii iiiirig) | | | | _ | is expenses as or | the following date. |
| Unite | ed States Bankruptcy Court for | the: NORTHI | ERN DISTRICT OF ILLING | OIS | 1 | MM / DD / YYYY | |
| | e number nown) | | | | | | |
| Of | ficial Form 106 | J | | | 1 | | |
| Sc | chedule J: You | r Expen | ses | | | | 12/1 |
| Be a | as complete and accurate ormation. If more space is nber (if known). Answer | as possible. needed, attac | If two married people are to this f | | | | |
| Part | | usehold | | | | | |
| 1. | Is this a joint case? No. Go to line 2. | | | | | | |
| | Yes. Does Debtor 2 li | ve in a separa | te household? | | | | |
| | □ No | | | | | | |
| | ☐ Yes. Debtor 2 | must file Officia | l Form 106J-2, Expenses | for Separate House | ehold of Debte | or 2. | |
| 2. | Do you have dependent | s? □ No | | | | | |
| | Do not list Debtor 1 and Debtor 2. | ■ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | | □ No |
| | dependents names. | | | Son | | 24 | Yes |
| | | | | | | | □ No □ Yes |
| | | | | | | | □ res |
| | | | | | | | ☐ Yes |
| | | | | | | | □ No |
| | | | | | | | ☐ Yes |
| 3. | Do your expenses inclu expenses of people oth yourself and your depen | erthan 🗖 | No Yes | | | | |
| | t 2: Estimate Your On | going Monthly | Expenses | | | | |
| exp | imate your expenses as o enses as of a date after t licable date. | | | | | | |
| the | ude expenses paid for wi value of such assistance ficial Form 106l.) | | | | | Your exp | enses |
| • | , | | | | | | |
| 4. | The rental or home own payments and any rent for | | | nclude first mortgag | e 4. \$ | | 1,195.00 |
| | If not included in line 4: | | | | | | |
| | 4a. Real estate taxes | | | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowr | • | | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance | | | | 4c. \$ | | 0.00 |
| 5. | 4d. Homeowner's asso Additional mortgage pa | | | me equity loans | 4d. \$ 5. \$ | | 0.00 0.00 |
| Ο. | , wantional mortgage pa | 7 | ar rootaottoo, suuli as IIUI | no caany idana | υ. ψ | | 17-1717 |

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| Debtor 1 Derry L S | Shaw | Case num | ber (if known) | |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------|-------------------------|
| 6. Utilities: | | | | |
| | , heat, natural gas | 6a. | \$ | 170.00 |
| • | wer, garbage collection | 6b. | · · · · · · · · · · · · · · · · · · · | 0.00 |
| | e, cell phone, Internet, satellite, and cable services | 6c. | · | 186.00 |
| 6d. Other. Spe | | 6d. | · <u> </u> | 0.00 |
| | ekeeping supplies | 7. | · | 325.00 |
| | children's education costs | 8. | · | 0.00 |
| | ry, and dry cleaning | 9. | · <u> </u> | 40.00 |
| | products and services | 9. 10. | · - | |
| | | | · | 30.00 |
| . Medical and de | • | 11. | \$ | 54.00 |
| I ransportation.Do not include ca | Include gas, maintenance, bus or train fare. | 12. | \$ | 200.00 |
| | clubs, recreation, newspapers, magazines, and books | 13. | · | 20.00 |
| | ributions and religious donations | 14. | · - | 20.00 |
| | ributions and religious donations | 14. | Φ | 20.00 |
| 5. Insurance. | surance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. Life insura | | 15a. | \$ | 65.00 |
| 15b. Health ins | | 15a. 15b. | • | 0.00 |
| 15c. Vehicle in | | 15b. 15c. | · | 151.00 |
| | | 15d. | | |
| 15d. Other insu | | 150. | φ | 0.00 |
| Taxes. Do not in Specify: | clude taxes deducted from your pay or included in lines 4 or 20. | 16. | \$ | 0.00 |
| 7. Installment or le | | | Ψ | 0.00 |
| | ease payments: ents for Vehicle 1 | 17a. | ¢ | 465.00 |
| | ents for Vehicle 1 | 17a. 17b. | · - | |
| | | | • | 415.00 |
| 17c. Other. Spe | | 17c. | · . | 0.00 |
| 17d. Other. Spe | · | 17d. | \$ | 0.00 |
| | of alimony, maintenance, and support that you did not report your pay on line 5, Schedule I, Your Income (Official Form 10 | | \$ | 0.00 |
| | s you make to support others who do not live with you. | ю. | \$ | 0.00 |
| Specify: | s you make to support others who do not live with you. | 19. | Ψ | 0.00 |
| | erty expenses not included in lines 4 or 5 of this form or on S | | our Income | |
| | s on other property | 20a. | | 0.00 |
| 20b. Real estat | | 20b. | | 0.00 |
| | homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | | 20d. 20d. | · | |
| | nce, repair, and upkeep expenses | | | 0.00 |
| | er's association or condominium dues | 20e. | · - | 0.00 |
| . Other: Specify: | | 21. | +\$ | 0.00 |
| 2. Calculate your | monthly expenses | | | |
| 22a. Add lines 4 | • | | \$ | 3,336.00 |
| | 2 (monthly expenses for Debtor 2), if any, from Official Form 106. | I-2 | \$ | 0,000.00 |
| | | 7 2 | | |
| ZZC. Add line 228 | a and 22b. The result is your monthly expenses. | | \$ | 3,336.00 |
| 3. Calculate your | monthly net income. | | | |
| • | 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 3,340.00 |
| | monthly expenses from line 22c above. | 23b. | | 3,336.00 |
| | | 200. | | 3,330.00 |
| 23c. Subtract v | our monthly expenses from your monthly income. | | | |
| | is your monthly net income. | 23c. | \$ | 4.00 |
| | - y | | | |
| 4. Do you expect a | an increase or decrease in your expenses within the year afte | er you file this | s form? | |
| For example, do yo | ou expect to finish paying for your car loan within the year or do you expect | | | e or decrease because o |
| | terms of your mortgage? | | | |
| No. | | | | |
| ☐ Yes. | Explain here: | | | |

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| Fill in this info | | | | | |
|---------------------------------|------------------------------------------------------|------------------------------------------|------------------------------|--------------------------|-----------------------------------|
| | rmation to identify your | case: | | | |
| Debtor 1 | Derry L Shaw First Name | Middle Name | Last Name | | |
| Dalata a O | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| , , , | | | | | |
| United States E | Bankruptcy Court for the: | NORTHERN DISTRIC | T OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | | | | | |
| | | | | | |
| Official For | rm 106Dec | | | | |
| Doclara | tion About a | n Individua | I Debtor's So | hadulas | 4045 |
| Deciara | HIOH ADOUL & | an marvidua | i Depioi 3 30 | ileuules | 12/15 |
| If two morning r | aaanla ava filina taaatha | . hath are agually ream | anaible for aumphing cor | reet information | |
| ii two iiiarrieu p | people are filling togethe | r, both are equally resp | onsible for supplying cor | rect information. | |
| You must file th | his form whenever you fi | ile bankruptcy schedule | es or amended schedules | . Making a false statem | ent, concealing property, or |
| obtaining mone | ey or property by fraud i | n connection with a bar | nkruptcy case can result i | n fines up to \$250,000, | or imprisonment for up to 20 |
| years, or both. | 18 U.S.C. §§ 152, 1341, 1 | l519, and 3571. | | | |
| | | | | | |
| | | | | | |
| Sig | gn Below | | | | |
| | | | | | |
| Did you p | ay or agree to pay some | one who is NOT an atto | orney to help you fill out b | pankruptcy forms? | |
| | | | | | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | Attach Bankru | ptcy Petition Preparer's Notice, |
| _ | · | | | | and Signature (Official Form 119) |
| | | | | | |
| l lo den oen | alter of manisum. I do alone | 41-41 1-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4- | | alith this alsolometism | |
| | iaity of perjury, I declare are true and correct. | that I have read the Sul | mmary and schedules file | d with this declaration | and |
| mat mey a | no nac ana concet. | | | | |
| X /s/ De | erry L Shaw | | X | | |
| Derry | L Shaw | | Signature of | Debtor 2 | |
| Signat | ure of Debtor 1 | | | | |

Date _____

Date May 11, 2017

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| Filli | n this inform | nation to identify you | r case: | | | |
|------------------|------------------------|--------------------------------------------------------|----------------------------------------------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------------|-------------------------------------------------------|
| Debt | | Derry L Shaw | | | | |
| DODE | OI I | First Name | Middle Name | Last Name | | |
| Debt | or 2 se if, filing) | First Name | Middle Name | Last Name | | |
| | - | | | | | |
| Unite | ed States Bar | nkruptcy Court for the: | NORTHERN DISTRICT (| DF ILLINOIS | | |
| Case (if know | e number wn) | | | | _ | Check if this is an amended filing |
| Sta Be as | complete a | of Financial and accurate as possiore space is needed, | attach a separate sheet to | are filing together, both are | ankruptcy equally responsible for sup | |
| numb | | i). Answer every ques | stion. arital Status and Where You | Lived Refere | | |
| | | current marital statu | | LIVEU DEIOIE | | |
| [| ☐ Married ■ Not mar | | | | | |
| 2. I | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. List | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | | |
| | Debtor 1 Pri | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | | | | | ity property state or territor co, Texas, Washington and V | |
| | ■ No □ Yes. Ma | ke sure you fill out <i>Sch</i> | hedule H: Your Codebtors (O | fficial Form 106H). | | |
| Part | 2 Explain | n the Sources of You | r Income | | | |
| F | Fill in the tota | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? |
| l i | □ No ■ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$5,112.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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| | | | | Debtor 1 | | | | | Debtor 2 | | |
|-----|-------------------------------------------|-------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------|
| | | | | Sources | of income that apply. | (be | oss income efore deductio clusions) | ns and | Sources of in Check all that | | Gross income (before deductions and exclusions) |
| | last caler nuary 1 to | ndar year: December 3 | 31, 2016) | ■ Wages bonuses, | s, commissions, tips | | \$18, | 031.00 | ☐ Wages, cor bonuses, tips | nmissions, | |
| | | | | ☐ Operat | ing a business | | | | ☐ Operating a | business | |
| | | dar year bef December 3 | | ■ Wages | s, commissions, | | \$5, | 105.00 | ☐ Wages, cor bonuses, tips | nmissions, | |
| | | | | ☐ Operat | ing a business | | | | ☐ Operating a | business | |
| | Include in and other winnings. List each | come regard public benefi If you are filin | ess of wheth t payments; ng a joint cas ne gross inco | er that inco pensions; re e and you h | | imples est; di ou red | s of <i>other inco</i> ividends; mor ceived togeth | ome are ali ney collecte er, list it on | ed from lawsuits ly once under D | ; royalties; and ebtor 1. | ecurity, unemployment I gambling and lottery |
| | | | | Debtor 1 | | | | | Debtor 2 | | |
| | | | | Sources of Describe b | | eac (be | oss income f ch source efore deductio clusions) | | Sources of in Describe below | | Gross income (before deductions and exclusions) |
| Par | t 3: Lis | t Certain Pay | ments You | Made Befo | re You Filed for E | Bankr | uptcy | | | | |
| 6. | □ No. | Neither De individual puring the No. Yes * Subject to Debtor 1 o | btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7 List below e | ebtor 2 has personal, fare you filed hach creditoreditor. Do no payments to on 4/01/19 r both have re you filed | for bankruptcy, did r to whom you paid ot include paymen of an attorney for the and every 3 years are primarily consum for bankruptcy, did r to whom you paid | d you day total day a total day a total day a total day ou day a total day ou day a total day | pay any credictal of \$6,425* domestic sup nkruptcy case that for case debts. pay any credictal of \$600 or | or more in port obligate. Since a total more and | of \$6,425* or more partions, such as corrafter the date of \$600 or more the total amount | ore? yments and th hild support ar of adjustment. ? | |
| | | | include pay attorney for | | | oligatio | ons, such as | child suppo | ort and alimony. | Also, do not ir | nclude payments to an |
| | Creditor | 's Name and | Address | | Dates of payme | nt | Total an | nount paid | Amount you still owe | Was this p | ayment for |

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| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No | | | | | | | | | | |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------|----------------------|-----------------------------------|----------------------|--|--|--|--|--|
| | ☐ Yes. List all payments to an insider. | | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for th | nis payment | | | | | |
| 3. | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider | | nents or transfer a | ny property on a | count of a deb | ot that benefited an | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for the Include creditor | | | | | | |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | | | | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | case | | | | | |
| | Midland Funding v Derry Shaw 17 SC 1139 | | Circuit Court fo Judicial | or the 16th | ■ Pending □ On appeal □ Concluded | | | | | | |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below. | | rty repossessed, f | oreclosed, garnis | hed, attached, | seized, or levied? | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the | | | | | |
| | | Explain what happened | | | | property | | | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment becar No Yes. Fill in the details. | | uding a bank or fir | nancial institution | , set off any an | nounts from your | | | | | |
| | Creditor Name and Address | Describe the action the | creditor took | Date : | action was | Amount | | | | | |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at ■ No □ Yes | | rty in the possessi | ion of an assigne | e for the benefi | it of creditors, a | | | | | |

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Case number (if known) Document Debtor 1 Derry L Shaw

| Pa | rt 5: List Certain Gifts and Contribution: | s | | | | | | | | |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------------|-----------------------------------|-------------------|--|--|--|--|--|
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift. | | | | | | | | | |
| | Gifts with a total value of more than \$600 per person | | Describe the gifts | Dates you gave the gifts | Value | | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | | |
| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. | | | | | | | | | |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code | Dates you contributed | Value | | | | | | | |
| Pa | rt 6: List Certain Losses | | | | | | | | | |
| 15. | Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? No Yes. Fill in the details. | | | | | | | | | |
| | Describe the property you lost and how the loss occurred | Date of your loss | Value of property lost | | | | | | | |
| Pa | rt 7: List Certain Payments or Transfers | | | | | | | | | |
| 16. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. | | | | | | | | | |
| | □ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Legal Remedies, Chartered 8525 S. Stony Island Chicago, IL 60617 | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | | |
| | | | Attorney Fees | April 2017 | \$500.00 | | | | | |
| | Summit Financial Education, Inc. | | Debt Counseling | April 2017 | \$14.95 | | | | | |
| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | | |
| | | | | | | | | | | |

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 4 Case 17-15390 Doc 1 Filed 05/17/17 Entered 05/17/17 16:52:13 Desc Main Page 36 of 48 Case number (if known) Document

Debtor 1 Derry L Shaw

| | include gifts and transfers that you have alread No Yes. Fill in the details. | dy listed on this statemer | nt. | | | | | |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|---------------------------|----------------------------------------------------------------------------|-----------------------------------------------|--|--|--|
| | Person Who Received Transfer Address | Description and property transfer | | Describe any property or payments received or debts paid in exchange | Date transfer was made | | | |
| | Person's relationship to you | | | | | | | |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | | | |
| | Name of trust | Description and value of the property transferred D | | | Date Transfer was | | | |
| | | 2 configuration and the property manner to | | made | | | | |
| Par | List of Certain Financial Accounts, In | struments, Safe Depos | it Boxes, and Stor | rage Units | | | | |
| 20. | sold, moved, or transferred? | | | | | | | |
| | Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accoun instrument | nt or Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | | | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | | |
| | ■ No | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had ac Address (Number, State and ZIP Code) | | Describe the contents | Do you still have it? | | | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe the contents | Do you still have it? | | | |
| Par | 19: Identify Property You Hold or Control | I for Someone Else | | | | | | |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, Code) | | Describe the property | Value | | | |
| | | | | | | | | |

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Debtor 1 Derry L Shaw

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used

| | to own, operate, or utilize it, including disposal sites. | | | | | | | | |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|------|-----------------------------------------------------------------|--------------------|--|--|--|
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. | | | | | | | | |
| Rep | ort a | II notices, releases, and proceedings th | nat you know about, regardless of when | the | y occurred. | | | | |
| 24. | Has | any governmental unit notified you tha | nt you may be liable or potentially liable | und | er or in violation of an environm | ental law? | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | Environmental law, if you know it | Date of notice | | | |
| 25. | Hav | Have you notified any governmental unit of any release of hazardous material? | | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | Environmental law, if you know it | Date of notice | | | |
| 26. | Hav | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | se Title se Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ure of the case | Status of the case | | | |
| Pai | rt 11: | Give Details About Your Business or | Connections to Any Business | | | | | | |
| 27. | Wit | nin 4 years before you filed for bankrup | tcy, did you own a business or have any | y of | the following connections to any | / business? | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | | |
| | No. None of the above applies. Go to Part 12. | | | | | | | | |
| | | Yes. Check all that apply above and fil | I in the details below for each business. | | | | | | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | | Describe the nature of the business Name of accountant or bookkeeper | | Employer Identification numbe Do not include Social Security | | | | |
| | | | | | Dates business existed | | | | |
| | | | | | | | | | |

Page 38 of 48 Case number (if known) Document Debtor 1 Derry L Shaw 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Derry L Shaw Signature of Debtor 2 **Derry L Shaw** Signature of Debtor 1 Date May 11, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Entered 05/17/17 16:52:13

Case 17-15390

Doc 1

Filed 05/17/17

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this infor | mation to identify your | case: | | |
|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| Debtor 1 | Derry L Shaw | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | Check if this is an amended filing |
| Official Fo | | n fan hadir | viduala Filipa Undan Chan | |
| Statemer | nt of intentio | n tor inaiv | <u>riduals Filing Under Chap</u> | ter / 12/15 |
| you have leas You must file thi whiche on the If two married pe sign ar Be as complete write y | ever is earlier, unless the form eople are filing together date the form. | ind the lease has not the lease has not the court extends the rin a joint case, bother in a firm of the case is th | ot expired. you file your bankruptcy petition or by the date e time for cause. You must also send copies to th are equally responsible for supplying correc s needed, attach a separate sheet to this form. C | the creditors and lessors you list tinformation. Both debtors must |
| | | art 1 of Schedule D | : Creditors Who Have Claims Secured by Prope | erty (Official Form 106D), fill in the |
| information be Identify the cr | elow. reditor and the property t | hat is collateral | What do you intend to do with the property the secures a debt? | nat Did you claim the property as exempt on Schedule C? |
| | | | | |
| Creditor's T | oyota Motor Credit | | ☐ Surrender the property. | □No |
| name: | | | Retain the property and redeem it. | - v |
| Description of | Toyota 2012 Matrix | c 100000 | Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property securing debt: | miles : | | ☐ Retain the property and [explain]: | |
| Creditor's T | oyota Motor Credit | | ☐ Surrender the property. | □ No |
| name: | -, | | Retain the property and redeem it. | — 110 |
| Description of | 2010 2010 4 Runne | er 103000 | Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

miles

Will the lease be assumed?

property

securing debt:

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| Debtor | 1 _ | Derry L Shaw | Case number (if ki | known) |
|-------------------------------|---------------|---------------------------------------------------------------------------------------------------|-----------------------------------------|------------------------------------|
| Lessor' Descrip Propert | otion | nme: of leased | | □ No |
| Lessor' Descrip Propert | otion | nme: of leased | | □ No |
| Lessor' Descrip Propert | otion | nme: a of leased | | □ No |
| Lessor' Descrip Propert | otion | ame: of leased | | □ No |
| Lessor' Descrip Propert | otion | ame: of leased | | □ No |
| Lessor' Descrip Propert | otion | ame: of leased | | □ No |
| Lessor' Descrip Propert | otion | ame: of leased | | □ No |
| Part 3: | s | Sign Below | | |
| Under p propert | oena y tha | alty of perjury, I declare that I have indicated my inten at is subject to an unexpired lease. | ion about any property of my estate tha | at secures a debt and any personal |
| D | erry | erry L Shaw v L Shaw ture of Debtor 1 | Signature of Debtor 2 | |
| Da | ate | May 11, 2017 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-15390 Doc 1 Filed 05/17/17 Entered 05/17/17 16:52:13 Desc Main Document Page 45 of 48

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Derry L Shaw | | | | | Case No. | | |
|-------------|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------|---------------------|
| | | | | Debto | r(s) | Chapter | 7 | |
| | DIS | CLO | OSURE OF CO | MPENSATION O | F ATTORNE | EY FOR DI | EBTOR(S) | |
| c | compensation paid t | o me v | within one year before | P. 2016(b), I certify that I the filing of the petition is plation of or in connection | n bankruptcy, or ag | greed to be paid | to me, for service | |
| | For legal service | es, I h | nave agreed to accept | | | \$ | 1,095.00 | |
| | Prior to the filing | ng of t | his statement I have re- | ceived | | \$ | 500.00 | |
| | Balance Due | | | | | \$ | 595.00 | |
| 2. \$ | 335.00 of the | filing | g fee has been paid. | | | | | |
| 3. T | The source of the co | mpens | sation paid to me was: | | | | | |
| | Debtor | | Other (specify): | | | | | |
| 4. T | The source of comp | ensatio | on to be paid to me is: | | | | | |
| | Debtor | | Other (specify): | | | | | |
| 5. I | I have not agree | d to sh | nare the above-disclose | ed compensation with any | other person unles | s they are mem | bers and associat | tes of my law firm. |
| I | | | | ompensation with a person f the names of the people | | | | my law firm. A |
| 6. I | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | | | |
| b c | o. Preparation and Representation of I. [Other provision Negotiation reaffirmation | filing of the descriptions as ne consumble con | of any petition, schedulebtor at the meeting of eeded] with secured creditor of the secured creditor o | nd rendering advice to the les, statement of affairs and f creditors and confirmation ors to reduce to marke plications as needed; on household goods | nd plan which may on hearing, and any et value; exempt preparation and | be required; y adjourned hea ion planning | arings thereof; ; preparation a | and filing of |
| 7. E | Represen | tatior | | osed fee does not include any dischargeability a | | | es, relief from | stay actions or |
| | | | | CERTIFICAT | TION | | | |
| | certify that the foreankruptcy proceeding | | is a complete statemen | nt of any agreement or arr | rangement for payn | nent to me for 1 | representation of | the debtor(s) in |
| M | ay 11, 2017 | | | /s/ Jai | mes L. Hardemo | n | | |
| | ate | | | | s L. Hardemon 1 | 126229 | <u> </u> | |
| | | | | | ure of Attorney Remedies, Cha | rtered | | |
| | | | | 8525 | S. Stony Island | | | |
| | | | | | igo, IL 60617 74-5288 Fax: 77 | 72_37 <i>A_</i> 56 <i>A</i> 2 | | |
| | | | | | 14-5266 Fax: 11 of law firm | J-314-304Z | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Derry L Shaw | | Case No. | |
|-------|--------------------------------------------|-----------------------------------------------------|---------------------------------|--------------|
| | | Debtor(s) | Chapter 7 | |
| | VE | RIFICATION OF CREDITOR M | IATRIX | |
| | | Number of | Creditors: | 13 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credi | tors is true and correct to the | e best of my |
| Date: | May 11, 2017 | /s/ Derry L Shaw Derry L Shaw Signature of Debtor | | |

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Comenity Bank/nwyrk&co 220 W Schrock Rd Westerville, OH 43081

Diversified Consultants PO Box 551268 Jacksonville, FL 32255

Foster & Garbus LLP 60 Motor Parkway Commack, NY 11725-5710

LVNV Funding Po Box 10497 Greenville, SC 29603

Midland Funding Attn: Bankruptcy Po Box 939069 San Diego, CA 92193

Professional Clinical Labs 26051 Network Place Chicago, IL 60673

Sams Club/Synchrony Bank PO Box 530942 Atlanta, GA 30353-0942

St. James Olympia Fields Hospital PO Box 126 Olympia Fields, IL 60461

Synchrony Bank/TJX Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

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Tnb-Visa (TV) / Target C/O Financial & Retail Services Mailstop BV PO Box 9475 Minneapolis, MN 55440

Toyota Motor Credit PO Box 8026 Cedar Rapids, IA 52409

US Bank/Rms CC Card Member Services Po Box 108 St Louis, MO 63166